## United States District Court

for the

Southern D	istrict of New York
LUNIQUE AGOSTINI, on behalf of herself and all others similarly situated,	) ) )
Plaintiff(s) V.	) Civil Action No. 1:24-cv-8831
Allure Day Spa & Hair Design, Inc.	)
	)
Defendant(s)	. <i>)</i> )

## **SUMMONS IN A CIVIL ACTION**

To: (Defendant's name and address) Allure Day Spa & Hair Design, Inc. 139 East 55th Street, New York, NY 10022

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Gabriel A. Levy, P.C.

1129 Northern Blvd, Ste 404, Manhasset, NY 11030

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: November 21, 2024 /S/ S. James

Signature of Clerk or Deputy Clerk

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Civil Action No. 1:24-cv-8831

## **PROOF OF SERVICE**

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was re	This summons for (name ceived by me on (date)	ne of individual and title, if any) .			
	☐ I personally served	the summons on the individual	at (place)		
			on (date)	; or	
	☐ I left the summons at the individual's residence or usual place of abode with (name)				
	, a person of suitable age and discretion who resides there, on (date), and mailed a copy to the individual's last known address; or, I served the summons on (name of individual), verifying the last the last transfer of the summons of the last force of the summons of the				
	designated by law to a	designated by law to accept service of process on behalf of (name of organization)  on (date)			
	☐ I returned the summ	nons unexecuted because		; or	
	☐ Other (specify):				
	My fees are \$	for travel and \$	for services, for a total of \$	0.00	
	I declare under penalty of perjury that this information is true.				
Date:					
			Server's signature		
			Printed name and title		
			Server's address		

Additional information regarding attempted service, etc: